			Vo	1 7 10.19		
CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN						
Is This Report an Amendment: Yes No				CITY OF FITCHBURG		
Instructions for completing schedules are on the back of each schedule.				JUL 5 2019		
COMMITTEE IDENTIFICATION						
Name of Committee Friends For Anne Scot	-r		RECEIVED			
Friends for Anne Scott Street Address 2561 Roanoke Cr City, State and Zip Code Fitchburg W1 53719				OFFICE USE ONLY		
City, State and Zip Code Fitchburg WI 53719						
Please check if address is different than previously reported, a	and complete the Campaign Reg	gistration State	ement in the b	ack of this form.		
NAME OF REPORT						
☐ January Continuing ☐ Pre-Primary ☐ July Continuing ☐ Pre-Election ☐ Pre-Election ☐	Spring :	Fall 🗍	Special	Termination Report also complete Schedule 4		
SUMMARY OF RECEIPTS AND	Column A	Colur	nn R			
DISBURSEMENTS	This Period	Cale				
1. RECEIPTS		Year-T	o-Date			
1A. Contributions (Including Loans) from Individuals	\$	\$				
1B. Contributions from Committees (Transfers-In)	\$	\$				
1C. Other Income and Commercial Loans	\$	\$				
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 6	\$ 0	/			
2. DISBURSEMENTS		/				
2A. Gross Expenditures	\$ 544.14	\$ 54	4.14			
2B. Contributions to Committees (Transfers-Out)	\$	S		/		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 544.14	\$ 540	4.14			
CASH SUMMARY	2					
Cash Balance Beginning of Report	\$ 659.88 Y					
Total Receipts	\$ 0					
Subtotal	\$ 659.88 V					
Total Disbursements	\$.60294	/				
CASH BALANCE END OF REPORT	\$ 56.94					
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$					
LOANS (Balance at the Close of This Period-3B)	\$ 6.19					
I certify that I have examined this report and to the best of	f my knowledge and belief it i	s true, correct	t and complet	te.		
	Ignature of Candidate or Treasurer		Date: 7/6			
Anne Scott	Emailascott (167@aol.c	nm.	8.50	none(608)271-4813		
	Emanus Coll 118 / Color. C	VIII	Daytime Ph	long sus Jain - To 10		

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

DISBURSEMENTSGross Expenditures

Page <u>1</u> of <u>1</u>

Complete Committee Name	Anne	Scott	
Instructions for completing			3 ,

Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
3/25/19	The UPS Store	Mailing + printing	544.14
	Check if:		
	Check if: In-Kind Offset		
	Check if: ☐ In-Kind Offset		
	Check if: ☐ In-Kind Offset		
	Check if: ☐ In-Kind Offset		
	Check if: In-Kind Offset		
	Check if: ☐ In-Kind Offset		
	Check if:		
	100		. cuu ul

TOTAL UNITEMIZED EXPENDITURES

TOTAL UNITEMIZED EXPENDITURES

TOTAL EXPENDITURES

\$ 544.14



Complete Committee Name

Loans Individual, Committee or Commercial ADDITIONAL DISCLOSURE

TOTAL OUTSTANDING LOANS \$ 6.19

Complete Com	Friends for Anne	Scott					
	or completing schedules are on the back of each						
	Full Name, Mailing Address and Zip Code of Loan Source Anne Scott		Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period	
Var	Fitchburg WI 53719		64.99	0	58.80	6.19	
List All Endorse	ers or Guarantors (if any)						
Full Name, Mailing Address and Zip Code of Guarantor		Occupation					
		Amount Guarante	ed Outstanding				
of Guarantor		Occupation					
		Amount Guaranteed Outstanding \$					
Date	Full Name, Mailing Address and Zip Code of Loan Source		Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period	
/ /							
List All Endorse	ers or Guarantors (if any)					-	
Full Name, Mailing Address and Zip Code of Guarantor		Occupation					
		Amount Guarantee	ed Outstanding				
of Guarantor		Occupation					
		Amount Guaranteed Outstanding \$					
Date	Full Name, Mailing Address and Zip Code of Loan Sou	urce	Outstanding Obligations Beginning of This Period	New Loans This Period	Cumulative Payments This Period	Outstanding Obligations End of This Period	
1 1							
List All Endorse	ers or Guarantors (if any)						
Full Name, Mailing Address and Zip Code of Guarantor		Occupation					
		Amount Guaranteed Outstanding \$					
Full Name, Mailing Address and Zip Code of Guarantor		Occupation					
		Amount Guaranteed Outstanding \$					
			SUBTOTAL	OUTSTANDING LOA	NS THIS PAGE	\$ 6.19	